



Docket No.  
**30227**

# Declaration and Power of Attorney For Patent Application

## English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### **PARTIALLY DEGLYCOSYLATED GLUCOCEREBROSIDASE POLYPEPTIDE AND CRYSTALS THEREOF**

the specification of which



is attached hereto.



was filed on **January 4, 2007** as United States Application No. **10/552,287**

and was amended on \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

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Prior Foreign Application(s)

Priority Not Claimed

**156273**  
(Number)

**Israel**  
(Country)

**2/June/2003**  
(Day/Month/Year Filed)



\_\_\_\_\_  
(Number)

\_\_\_\_\_  
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\_\_\_\_\_  
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I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

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(Application Serial No.)

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(Filing Date)

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**PCT/IL2004/000335**

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**18 April 2004**

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(Application Serial No.)

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(Filing Date)

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(Status)  
(patented, pending, abandoned)

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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with the following Customer Number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

**67801**

Send Correspondence to the address associated with Customer Number:

**67801**

Direct Telephone Calls to: *(name and telephone number)*

**Martin D. MOYNIHAN**

Tel. No. (703) 598-7851

Fax No. (703) 415-4864

FULL NAME OF SOLE OR FIRST INVENTOR		<b>Anthony FUTERMAN</b>
Sole or first inventor's signature		<i>[Signature]</i> Date <u>6 Aug, 2009</u>
Residence	:	12 Neve Metz, The Weizmann Institute of Science, 76100 Rehovot, Israel
Citizenship	:	ISRAELI
Post Office Address	:	12 Neve Metz, The Weizmann Institute of Science, 76100 Rehovot, Israel

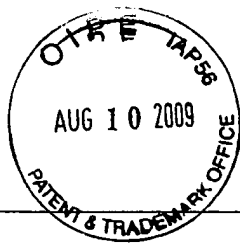
FULL NAME OF SECOND INVENTOR, IF ANY		<b>Joel L. SUSSMAN</b>
Second inventor's signature		Date _____
Residence	:	Simtah A, #2, Willner Residence, The Weizmann Institute of Science, 76100 Rehovot, Israel
Citizenship	:	ISRAELI
Post Office Address	:	Simtah A, #2, Willner Residence, The Weizmann Institute of Science, 76100 Rehovot, Israel

FULL NAME OF THIRD INVENTOR , IF ANY		<b>Israel SILMAN</b>
Third inventor's signature _____		Date _____
Residence	:	54 HaNassi HaRishon Street, 76302 Rehovot, Israel
Citizenship	:	ISRAELI
Post Office Address	:	54 HaNassi HaRishon Street, 76302 Rehovot, Israel

FULL NAME OF FOURTH INVENTOR , IF ANY		<b>Michal HAREL</b>
Fourth inventor's signature _____		Date _____
Residence	:	2 HaParag Street, 76568 Rehovot, Israel
Citizenship	:	ISRAELI
Post Office Address	:	2 HaParag Street, 76568 Rehovot, Israel

FULL NAME OF FIFTH INVENTOR , IF ANY		<b>Hay DVIR</b>
Fifth inventor's signature _____		Date _____
Residence	:	7978 Avenida Navidad, Apt. #76, San Diego, CA 92122
Citizenship	:	ISRAELI
Post Office Address	:	7978 Avenida Navidad, Apt. #76, San Diego, CA 92122

FULL NAME OF SIXTH INVENTOR , IF ANY		<b>Lilly TOKER</b>
Sixth inventor's signature _____		Date _____
Residence	:	41 Dubnov Street; 76406 Rehovot, Israel
Citizenship	:	ISRAELI
Post Office Address	:	41 Dubnov Street; 76406 Rehovot, Israel

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Sole or first inventor's signature		Date
Residence	:	12 Neve Metz, The Weizmann Institute of Science, 76100 Rehovot, Israel
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FULL NAME OF SECOND INVENTOR, IF ANY		<b>Joel L. SUSSMAN</b>
Second inventor's signature		Date <u>5 AUG 2008</u>
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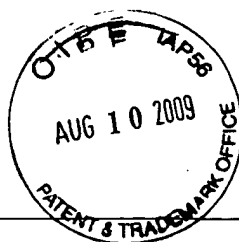
Tel. No. (703) 598-7851

Fax No. (703) 415-4864

FULL NAME OF SOLE OR FIRST INVENTOR	<b>Anthony FUTERMAN</b>
Sole or first inventor's signature	_____ Date _____
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Second inventor's signature	_____ Date _____
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FULL NAME OF FOURTH INVENTOR, IF ANY		<b>Michal HAREL</b>	
Fourth inventor's signature <i>Michal Harel</i>		Date <i>05/08/09</i>	
Residence	:	2 HaParag Street, 76568 Rehovot, Israel	
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(Application Serial No.)

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(Filing Date)

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(Status)  
(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with the following Customer Number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

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